

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

09153782

FILING DATE

9/16/98

APPLICANT(S)

Vance C. Bjorn

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15	1					
16						
17						
18						
19						
20						
21						
22						
23	1					
24						
25						
26						
27						
28						
29						
30						
31						
32						
33						
34						
35						
36						
37						
38						
39						
40						
41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	3					
TOTAL DEP.		28				
TOTAL CLAIMS	31					

	* Amst C		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1 81	1					
2 82		1				
3 83		1				
4 84		1				
5 85		1				
6 86		1				
7 87		1				
8 88		1				
9 89		1				
10 90		1				
11 91		1				
12 92		1				
13 93		1				
14 94		1				
15 95	1					
16 96		1				
17 97		1				
18 98		1				
19 99		1				
20 00		1				
21 01		1				
22 02		1				
23 03	1					
24 04		1				
25 05		1				
26 06		1				
27 07		1				
28 08		1				
29 09		1				
30 10		1				
31 11		1				
32 12						
33 13						
84						
85						
86						
87						
88						
89						
90						
91						
92						
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.	3					
TOTAL DEP.		28				
TOTAL CLAIMS	31					

PTO-1380 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS U.S. DEPARTMENT OF COMMERCE